## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (871)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address are included unless corrected below or directed otherwise in Block 1, by (a) perchapting a new correspondence address are accorded to the control excellent of Block 1, by (a) perchapting a new correspondence address and according to the control of the patent of the patent

indicated unless corrects maintenance fee notifica	ed below or directed oth tions.	erwise in Block 1, by (a				arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
21839	7590 11/06	/2008	nave		-		
BUCHANAN, INGERSOLL & ROONEY PC POST OFFICE BOX 1404 ALEXANDRIA, VA 22313-1404				I hereby certify that this Feeds' Transmission I hereby certify that this Feeds' Transmistal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
			Г			(Depositor's name)	
			<u> </u>			(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/807.346 03/24/2004			Daisetsu Tohyama	Daisetsu Tohyama 018656-683 5384		5384	
TITLE OF INVENTION: IMAGE TRANSMISSION APPARATUS AND CONTROL METHOD							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUI	E DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	02/06/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
	CHAN S	2625	358-001130				
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1363).  CRR 1363).  Change of correspondence address (or Change of Correspondence Address form PTOVSB1/22) attached.  Jee Address' Indication (67 Fee Address' Indication form PTOVSB47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to or agents OR, alternati (2) the name of a sing registered attorney or	f a single firm (having as a member a rivey or agent) and the names of up to tent attorneys or agents. If no name is			
PLEASE NOTE: Ur recordation as set for (A) NAME OF ASSI KONICA M TECHNOLO	nless an assignee is iden thin 37 CFR 3.11. Com IGNEE INOLTA BUSINE IGIES. INC.	tified below, no assignee pletion of this form is NO	(B) RESIDENCE: (CIT CHIYODA-KU	TEMT (print or type)  appear on the patent. If an assignee is identified below, the document has been filed for inside for filing an assignment.  BIDENCE: (CITY and STATE OR COUNTRY)  HIYODA—KU, TOKYO, JAPAN  the patent):   Individual  Corporation or other private group entity  Government			
Please check the approp	riate assignee category o	r categories (will not be p	rinted on the patent):	Individual @ Co	poration or other private g	roup entity Governmen	
4a. The following fee(s)  Issue Fee  Publication Fee ( Advance Order -	No small entity discount		h, Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)    A check is enclosed.   Payment by credit card Form PTO-2038 is attached.   The Director is breely authorized to charge sign grouping (fee(s), any deficiency, or credit any overpayment, to Depoid Account humber 0/2—48/000 (eactions an actor copy of this form).				
a. Applicant clair	atus (from status indicate ms SMALL ENTITY sta	tus. See 37 CFR 1.27.			L ENTITY status. See 37		
NOTE: The Issue Fee a	and Publication Fee (if re-	quired) will not be accepted	ed from anyone other than k Office.	the applicant; a regis	tered attorney or agent; or	the assignee or other party i	
interest as shown by the records of the United States Pages and Trademark Office.  Authorized Signature Signature Signature Authorized Signature Signature Authorized Signature Si							
Typed or printed nar	william C.			Registration N	30,888		
This collection of infor an application. Confide submitting the complet this form and/or sugges Box 1450, Alexandria,	mation is required by 37 initiality is governed by 3 ed application form to the stions for reducing this b Virginia 22313-1450. D	CFR 1.313. The informat 5 U.S.C. 122 and 37 CFR ic USPTO. Time will var- urden, should be sent to to O NOT SEND FEES OR	ion is required to obtain or 1.14. This collection is e y depending upon the ind he Chief Information Offi COMPLETED FORMS	retain a benefit by the stimated to take 12 n ividual case. Any co cer, U.S. Patent and TO THIS ADDRESS	ne public which is to file (a ninutes to complete, inclu- mments on the amount of Trademark Office, U.S. De SEND TO: Commission	and by the USPTO to process ding gathering, preparing, an time you require to complet epartment of Commerce, P.C er for Patents, P.O. Box 1450	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.